

**● PRINTER RUSH ●**  
**(PTO ASSISTANCE)**

Application: 10/646,920 Examiner: Lobo GAU: 3662

From: DR Location: IDC FMF FDC Date: 11/11/2005

Tracking #: EPM 10/646,920 Week Date: 9/26/2005

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>8/11/2005</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Renumbered claim 3 and 4 (originals claim 6 and 5 depends on a cancelled claim 2.

*JL*  
*Thank you.*

[XRUSH] RESPONSE: Claims 3 & 4 (renumbered) to depend upon claim 1. See examiner's amendment.

INITIALS: JL.

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04